TOMAH HEALTH CARE CENTER

1505 BUTTS AVE

TOMAH	54660	Phone: (608) 372-3241		Ownership:	Corporation
Operated from 1	l/1 To 12/31	Days of Operation:	366	Highest Level License:	Skilled
Operate in Conju	unction with	Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds S	Set Up and St	affed (12/31/04):	84	Title 18 (Medicare) Certified?	Yes
Total Licensed D	Bed Capacity	(12/31/04):	84	Title 19 (Medicaid) Certified?	Yes
Number of Reside	ents on 12/31	/04:	54	Average Daily Census:	58

Services Provided to Non-Residents	Age, Gender, and Primary Di	Length of Stay (12/31/04)						
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	64.8	
Supp. Home Care-Personal Care	No					1 - 4 Years	22.2	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.3	More Than 4 Years	13.0	
Day Services	Yes	Mental Illness (Org./Psy)	65 - 74	13.0				
Respite Care	Yes	Mental Illness (Other)	16.7	75 - 84	44.4		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	25.9	********	*****	
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	1.9	95 & Over	7.4	Full-Time Equivalent		
Congregate Meals No		Cancer	1.9			- Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.9	İ	100.0	(12/31/04)		
Other Meals	No	Cardiovascular	16.7	65 & Over	90.7			
Transportation	No	Cerebrovascular	5.6			RNs	9.6	
Referral Service	Yes	Diabetes	3.7	Gender	%	LPNs	8.4	
Other Services	No	Respiratory	1.9			Nursing Assistants,		
Provide Day Programming for	j	Other Medical Conditions	27.8	Male	44.4	Aides, & Orderlies	51.7	
Mentally Ill	No			Female	55.6			
Provide Day Programming for	j		100.0	İ				
Developmentally Disabled	No			ĺ	100.0			

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay	:		amily Care			anaged Care	l		
Level of Care	No.	્ર	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	4	10.3	133	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	7.4
Skilled Care	6	100.0	344	34	87.2	114	0	0.0	0	9	100.0	147	0	0.0	0	0	0.0	0	49	90.7
Intermediate				1	2.6	95	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.9
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		39	100.0		0	0.0		9	100.0		0	0.0		0	0.0		54	100.0

TOMAH HEALTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	ssistance of	-	Number of
Private Home/No Home Health	9.0	Daily Living (ADL)	Independent	One	e Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		66.7	33.3	54
Other Nursing Homes	0.0	Dressing	14.8		63.0	22.2	54
Acute Care Hospitals	1.6	Transferring	25.9		53.7	20.4	54
Psych. HospMR/DD Facilities	89.3	Toilet Use	25.9		48.1	25.9	54
Rehabilitation Hospitals	0.0	Eating	64.8		27.8	7.4	54
Other Locations	0.0	******	*****	*****	******	******	*****
Total Number of Admissions	122	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	7.4	Receiving Resp	iratory Care	3.7
Private Home/No Home Health	13.5	Occ/Freq. Incontinen	t of Bladder	37.0	Receiving Trac	heostomy Care	3.7
Private Home/With Home Health	12.7	Occ/Freq. Incontinen	t of Bowel	29.6	Receiving Suct	ioning	1.9
Other Nursing Homes	2.4	į			Receiving Osto	my Care	3.7
Acute Care Hospitals	50.8	Mobility			Receiving Tube	Feeding	3.7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	24.1
Rehabilitation Hospitals	0.0	į -			_	-	
Other Locations	7.9	Skin Care			Other Resident C	haracteristics	
Deaths	12.7	With Pressure Sores		1.9	Have Advance D	irectives	24.1
Total Number of Discharges		With Rashes		3.7	Medications		
(Including Deaths)	126				Receiving Psyc	hoactive Drugs	64.8

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

		Own	ership:	Bed	Size:	Lic	ensure:				
	This	Pro	prietary	50	-99	Ski	lled	Al	1		
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities		
	%	%	Ratio	%	Ratio	90	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	69.0	81.9	0.84	85.5	0.81	85.9	0.80	88.8	0.78		
Current Residents from In-County	64.8	72.8	0.89	71.5	0.91	75.1	0.86	77.4	0.84		
Admissions from In-County, Still Residing	15.6	18.7	0.83	20.7	0.75	20.5	0.76	19.4	0.80		
Admissions/Average Daily Census	210.3	151.4	1.39	125.2	1.68	132.0	1.59	146.5	1.44		
Discharges/Average Daily Census	217.2	151.2	1.44	123.1	1.77	131.4	1.65	148.0	1.47		
Discharges To Private Residence/Average Daily Census	56.9	74.0	0.77	55.7	1.02	61.0	0.93	66.9	0.85		
Residents Receiving Skilled Care	98.1	95.3	1.03	95.8	1.02	95.8	1.02	89.9	1.09		
Residents Aged 65 and Older	90.7	94.3	0.96	93.1	0.97	93.2	0.97	87.9	1.03		
Title 19 (Medicaid) Funded Residents	72.2	71.9	1.00	69.1	1.05	70.0	1.03	66.1	1.09		
Private Pay Funded Residents	16.7	16.7	1.00	20.2	0.83	18.5	0.90	20.6	0.81		
Developmentally Disabled Residents	0.0	0.6	0.00	0.5	0.00	0.6	0.00	6.0	0.00		
Mentally Ill Residents	38.9	29.5	1.32	38.6	1.01	36.6	1.06	33.6	1.16		
General Medical Service Residents	27.8	23.5	1.18	18.9	1.47	19.7	1.41	21.1	1.32		
Impaired ADL (Mean)	48.1	46.4	1.04	46.2	1.04	47.6	1.01	49.4	0.97		
Psychological Problems	64.8	54.5	1.19	59.0	1.10	57.1	1.13	57.7	1.12		
Nursing Care Required (Mean)	5.8	7.4	0.79	7.0	0.83	7.3	0.79	7.4	0.78		